

SENATE JOINT RESOLUTION 44

By Briggs

A RESOLUTION relative to improving the care of atherosclerotic cardiovascular disease.

WHEREAS, cardiovascular disease is the leading cause of death in the United States; and

WHEREAS, in the United States, approximately 21 million patients have been diagnosed with atherosclerotic cardiovascular disease (ASCVD) and are at risk of a cardiovascular event, according to the U.S. Census Bureau; and

WHEREAS, the Mayo Clinic states that ASCVD is linked to the buildup of cholesterol in the arteries, and the risk of associated events can be modified by lowering low-density lipoprotein cholesterol (LDL-C); and

WHEREAS, in 2016, nearly 70 million adults in the United States had higher than recommended LDL-C levels; and

WHEREAS, 43.1 million people in the United States are currently treated with lipid-lowering therapies to manage cardiovascular risk; and

WHEREAS, only 20 percent of people with ASCVD who are taking statins, one of the leading lipid-lowering therapies, actually achieve healthy levels of LDL-C; and

WHEREAS, the total direct and indirect cost of ASCVD in the United States was \$555 billion in 2016 and is projected to climb to \$1.1 trillion by 2035, according to the American Heart Association; and

WHEREAS, in Tennessee, 579,200 adults have been told by a health professional that they had angina, a stroke, a heart attack, or coronary heart disease, which are some of the manifestations of ASCVD; and

WHEREAS, in Tennessee, 10,491 people had ASCVD as an underlying cause of death;  
and

WHEREAS, in Tennessee, 280,700 adults reported experiencing a heart attack in their lifetime, and 243,600 adults reported experiencing a stroke in their lifetime; and

WHEREAS, Tennessee spends an estimated \$3.41 billion on direct medical expenses for ASCVD care each year; now, therefore,

BE IT RESOLVED BY THE SENATE OF THE ONE HUNDRED THIRTEENTH GENERAL ASSEMBLY OF THE STATE OF TENNESSEE, THE HOUSE OF REPRESENTATIVES CONCURRING, that we urge state agencies to expand comprehensive cardiovascular screening programs to allow for earlier identification of patients at risk of cardiovascular events.

BE IT FURTHER RESOLVED, that we urge state agencies to explore ways to collaborate with federal and national agencies to establish or expand comprehensive cardiovascular screening programs.

BE IT FURTHER RESOLVED, that we urge an update of the State's cardiovascular plan to accelerate quality improvements in the care rendered to these patients such that screening, treatment, monitoring, and improved health outcomes are achieved.

BE IT FURTHER RESOLVED, that we support the creation of policies to decrease the rising number of deaths of Americans as a result of ASCVD.

BE IT FURTHER RESOLVED, that a certified copy of this resolution be transmitted to the President of the United States, the Vice President of the United States, the members of the Tennessee Congressional Delegation, and other federal and state government officials and agencies as appropriate.